

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

10/605821

## CLAIMS AS FILED - PART I

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20=    |              |
| INDEPENDENT CLAIMS  | minus 3=     |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| X \$ 25=  |     |
| X 100=    |     |
| +180=     |     |
| TOTAL     |     |

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| X \$ 50=  |     |
| X 200=    |     |
| +360=     |     |
| TOTAL     |     |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

Amended 10-10-06

|   |             | (Column 1)                       |       | (Column 2)                         | (Column 3)    |
|---|-------------|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT A   |             | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total       | * 25                             | Minus | ** 25                              | = 0           |
|   | Independent | * 3                              | Minus | *** 3                              | = 0           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |             |                                  |       |                                    |               |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25=         |                |
| X 100=           |                |
| +180=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50=         |                |
| X 200=           |                |
| +360=            |                |
| TOTAL ADDIT. FEE |                |

|   |             | (Column 1)                       |       | (Column 2)                         | (Column 3)    |
|---|-------------|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B   |             | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total       | *                                | Minus | **                                 | =             |
|   | Independent | *                                | Minus | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |             |                                  |       |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25=         |                |
| X 100=           |                |
| +180=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50=         |                |
| X 200=           |                |
| +360=            |                |
| TOTAL ADDIT. FEE |                |

|   |             | (Column 1)                       |       | (Column 2)                         | (Column 3)    |
|---|-------------|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C   |             | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total       | *                                | Minus | **                                 | =             |
|   | Independent | *                                | Minus | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |             |                                  |       |                                    |               |

| RATE     | ADDITIONAL FEE |
|----------|----------------|
| X \$ 25= |                |
| X 100=   |                |
| +180=    |                |

| RATE     | ADDITIONAL FEE |
|----------|----------------|
| X \$ 50= |                |
| X 200=   |                |
| +360=    |                |